

Foster Family Home - Corrective Action Report

Provider ID: 1-100071

Home Name: Maria Fe Mabborang, CNA

Review ID: 1-100071-7

91-1747 Kuapuu Street

Reviewer: Jackie Chamberlain

Ewa Beach HI 96706

Begin Date: 4/24/2020

Foster Family Home

Required Certificate

[11-800-6]

6.(d)(1) Comply with all applicable requirements in this chapter; and

Comment:

Recertification inspection conducted for this CCFFH. Home met all temporary compliance requirements as determined during Covid-19 criteria at the time of the home inspection. No corrective action required

Jackie Chamberlain
Compliance Manager

Maria Fe Mabborang
Primary Care Giver

4/24/2020
Date

04/24/2020
Date